

Application Data Sheet**Application Information**

Application Type:: National Stage
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: HYDROXYLAMINE DERIVATIVES
Attorney Docket Number:: 2503-1218
Request for Early No
Publication?::
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: CARLA
Middle Name::
Family Name:: CACCIA
Name Suffix::
City of Residence:: CARDANO AL CAMPO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA ROGORAZZO, 29D
Address::
City of Mailing Address:: CARDANO AL CAMPO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-21010

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: LAURA
Middle Name::
Family Name:: GIROLA
Name Suffix::
City of Residence:: GERENZANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA VERDI, 4
Address::
City of Mailing Address:: GERENZANO

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-21040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PETRA KARIN
Middle Name::
Family Name:: KALTOFEN
Name Suffix::
City of Residence:: MILANO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA LANINO, B4
Address::
City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-20144

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: DANIELE
Middle Name::
Family Name:: LOSI
Name Suffix::
City of Residence:: ROVELLASCA
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA CARSO, 28B

Address::

City of Mailing Address:: ROVELLASCA

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-22069

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: PATRICIA

Middle Name::

Family Name:: SALVATI

Name Suffix::

City of Residence:: ARESE

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing Address:: VIA VALERA, 16/C

Address::

City of Mailing Address:: ARESE

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20020

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: ENRICO

Middle Name::

Family Name:: SELVA

Name Suffix::

City of Residence:: GROPELLO CAIROLI

State or Province of

Residence::

Country of Residence:: ITALY
Street of Mailing VIA DI VITTORIO, 23
Address::
City of Mailing Address:: GROPELLO CAIROLI
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-27027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: FLORIAN
Middle Name::
Family Name:: THALER
Name Suffix::
City of Residence:: MERANO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA VAL DI NOVA, 31
Address::
City of Mailing Address:: MERANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-39012

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

| | |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number:: | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------|----------------------|----------------------|
| This application | National Stage of | PCT/EP2004/014077 | 12/10/04 |
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| EUROPE | 03028441.8 | 12/11/03 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::